

## Forms Checklist for Employers Using BDS Fiscal

Please return ALL of the forms listed below, including this checklist, to BDS Fiscal. Each of these forms will have the heading 'Send to BDS' in the upper right corner and may be returned via mail, fax, or email\*\*. You are encouraged to make copies of anything you sign before mailing. You may also contact BDS Fiscal for copies of your paperwork if needed.

**\*\*EXCEPT Forms 8655 and 8821, which must be mailed. The IRS requires the originals with your wet signature.**

Each employee you hire will receive an Employee Handbook. It will have two releases of information for you to sign: one to allow your employee and Ozaukee County to share information, and one for your employee and BDS Fiscal. There will also be several forms for both you & the employee to sign. Copies of several of these forms are included in this packet for your reference on pages 6-11.

BDS Fiscal  
c/o Broadscope Disability Services  
6102 West Layton Avenue  
Greenfield, WI 53220

Fax: 414-329-4510

Email: [bdsfiscal@broadscope.org](mailto:bdsfiscal@broadscope.org)

*Scans or pictures of your documents need to be clearly legible.*

- Forms Checklist – page 3
- Fiscal Agent Agreement – page 12
- Fiscal Agent Release – page 13
- Form SS-4 Application for Employer Identification Number – page 15
- \*\*Form 8655 Reporting Agent Authorization – page 17 (ORIGINAL REQUIRED)
- \*\*Form 8821 Tax Information Authorization – page 18 (ORIGINAL REQUIRED)
- My Tax Account Authorization – page 19

Name of child receiving services: \_\_\_\_\_

Parent/Guardian email address: \_\_\_\_\_

We will communicate program updates & information primarily via email. Do you also want to receive our monthly resource newsletters, notifications about giveaways and special events, etc. via email?  Yes  No

**My signature verifies that all of the above forms are filled out completely and accurately and will be returned to BDS Fiscal via the contact information listed above.**

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE